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Case: PITMO-002A

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s): Steven J. Edwards

Serial No.: 10/721,635

Filed: November 25, 2003

For: Flexible Neck Toothbrush

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Examiner: Unknown

Art Unit: 3732

Confirmation No. 7727

STATUS LETTER

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir/Madam:

The above-identified Patent was filed on November 25, 2003 and the Applicant is awaiting the initial Office Action.

In light of the foregoing, please advise us of the status of this application.

Respectfully submitted,

Date:

8/17/04

Customer No.: 007663

By:

Attorney: William J. Brucker

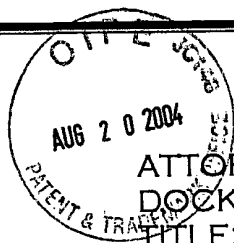
Registration No. 35,462

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ATTORNEY: WILLIAM J. BRUCKER
DOCKET NO: FITMO-002A
TITLE: FLEXIBLE NECK TOOTHBRUSH

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**TRANSMITTAL
FORM**

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission	Application Number	10/721,635	
	Filing Date	11/25/2003	
	First Named Inventor	STEVEN J. EDWARDS	
	Art Unit	3732	
	Examiner Name	UNKNOWN	
		Attorney Docket Number	FITMO-002A

ENCLOSURES (Check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input checked="" type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): PLEASE CHARGE ANY ADDITIONAL AMOUNT TO DEPOSIT ACCOUNT NO. 19-4330
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Signature	STETINA BRUNDA GARRED & BRUCKER - Customer No. 007663		
Date	AUGUST 17, 2004		

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Typed or printed name	BROOKS D. HALL		
Signature	<i>Brooks D. Hall</i>	Date	8/17/2004

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